

STONEHAM PUBLIC LIBR
431 MAIN STREET
STONEHAM, MA 02180



A History of
NEW ENGLAND MEMORIAL HOSPITAL

by Arthur L. Tauro

II

974.44
T190
C.4

STONEHAM PUBLIC LIBRARY
431 MAIN STREET
STONEHAM, MA 02180

974.44

T19n

C.4

STONEHAM PUBLIC LIBRARY
STONEHAM, MA 02180



*This story is dedicated
to the alumni nurses
of this hospital.*



Digitized by the Internet Archive
in 2024 with funding from
Boston Public Library

<https://archive.org/details/historyofnewengl00taur>

INTRODUCTION

Someone once said that the human brain, being the wonderful organ that it is, begins to function the day we are born. In my case it ceases to function when I face an audience. And that is why you see this pile of notes in front of me to which I will refer frequently during the afternoon.

Last January (1983) our hospital president, Mr. Wolfgang von Maack, during the course of a conversation, asked if I would prepare a list of changes that I have seen take place in this hospital during my many years as a member of this staff and present them at the annual hospital dinner in 1984.

At first I hesitated. With my memory not being what it used to be, I wondered how well it would serve me for this forty-six-year period. But I told him I would try. Then I thought, "Why start with the year 1937?" Why not present a history of this hospital from its very beginning.

So I started doing some research. I read text books, old pamphlets and old newspaper clippings. About a month later our Executive Vice President, Mr. Landon Kite, spotted me in the Medical Records Department looking over a stack of papers, and he said, "I see they've got you working on your medical records." "No," I answered, "this is some of the material I've collected for the speech that Mr. von Maack wants me to give at next year's hospital dinner, and I've collected quite a bit already." He said, "You know, I don't have a speaker lined up for this year's dinner yet. Could you give your talk this year instead of next year?"

Realizing that I still had two more months to prepare for it, I said, "I think so."

"Good," he said, "You are the main speaker for this year's annual hospital dinner."

Now I really got down to work. I read more text books and more old pamphlets. I went to the Stoneham Public Library researching more old newspapers. I spoke to many people who were associated with this hospital long before I came here. I even went to the Heritage Room of Langwood Hall seeking information. Here, I found many alumni nurses memorabilia.

And so, with all this information of dates, details, quotations, etc. that I had gathered, and as best as I could put it all together, this is my story of the history of New England Memorial Hospital from its very beginning.



HISTORY

In 1882 a group of Seventh-day Adventists founded the South Lancaster Academy in South Lancaster, Massachusetts. With increasing enrollments, expanding facilities, improved finances and other signs of progress, the academy grew into a junior college, and finally a college, known as Atlantic Union College, was established. In 1895 the academy dormitory was transformed into a sanitarium “dedicated as a health center to serve all races, creeds and nationalities, regardless of ability to pay, and give health restoring treatment and wise instruction from Christian nurses and physicians.” In 1899 the sanitarium received its first charter and became known as The New England Sanitarium and Benevolent Association.

The sanitarium flourished during its three years of existence, and in 1901 it attracted 501 patients from 22 states, several Canadian provinces and the Island of Jamaica. In November 1901 the institution graduated its first seven nurses after a two-year training period. The sanitarium continued to grow and prosper, so much so that during the summer of 1901 some of the patients had to be placed in homes in the village. On good days, patients who were able were wheeled onto the front lawn where they could enjoy the fresh air and sunshine. The future looked bright, but as in most human endeavors things do not always run smoothly, and this sanitarium was no exception.

At the turn of the century South Lancaster had a population of less than 2,000 people, mostly farmers and textile workers who were employed in the adjacent town of Clinton. Its most prestigious family by far was the very prominent and wealthy Thayer family.

During the three years of its existence the sanitarium people had noticed a coolness in the townspeople toward them and the most vocal of all was Mrs. Thayer, who expressed her desire to have the sanitarium moved elsewhere.

One of her complaints was that she was very upset on seeing sick people in wheelchairs whenever she looked out of her window, and she asked her husband to see if he could do something about it. Being a fine gentleman and a good husband, Mr. Thayer called the manager of the sanitarium and asked him to come to his home. After a lengthy discussion Mr. Thayer offered a “handsome price” for the land on which the building was erected and even offered to pay for the dismantling of the building, allowing the Adventists to keep the lumber if they decided to build a new sanitarium elsewhere. Meanwhile, Mr. Thayer was offering to buy all the land that was available in that vicinity.

At this time we are going to leave South Lancaster temporarily and go to another part of the world. One of the best known Seventh-day Adventists who was also a missionary was Mrs. Ellen G. White. In the late 1890s while in Australia, Mrs. White wrote a letter to the Seventh-day Adventist General Conference in Battle Creek, Michigan, stating that she had an “insight” or a vision of a piece of property at Spot Pond in Melrose, Massachusetts, and suggested that they investigate it. The conference sent two men to Boston where they boarded a train which took them to Melrose. They then took a horse and buggy through one of the many winding dirt roads that led them to Spot Pond. Here they found a large wooden building known as the Langwood Hotel. When the manager of the hotel was asked about its availability, they were told that it was not available at any price. After returning to Battle Creek, they wrote to Mrs. White and told her that they had found the property on Spot Pond, but it was not for sale.

Several months went by and Mrs. White again wrote to the General Conference suggesting that they revisit the property in Melrose and again check into its availability. This time the owners were in a more receptive mood, but the asking price was far beyond their means. The travelers went back to Battle Creek and again wrote to Mrs. White stating that the property was available but the price was more than they could afford.

Several more months went by, and Mrs. White again wrote to the General Conference saying that she felt that it was very important, if at all possible, that they purchase the property on Spot Pond. Again, representatives were sent to Spot Pond. This time they found that there had been a fire at the hotel which had destroyed a good part of the building. There also had been problems with illegal gambling on one of the islands as well as in the hotel itself.

What the Adventists did not know at that time, and as a matter of fact, what few people know to this day, is that a state committee was in the process of taking over all the land that made up the entire Middlesex Fells Reservation because of the gambling problems that existed there. Nevertheless, after much negotiating, a price was agreed upon, and the property was purchased in 1902.

The purchase price for the buildings and 45 acres of land was \$39,000, and \$6,000 worth of furniture was included at no extra charge.

What a setting for a hospital with its attractive landscape and some of the most beautiful sunsets seen anywhere!

Two weeks after the sale had gone through the committee that was working on taking over the property on the reservation learned of the sale and of the Adventists’ plans to replace the hotel with a hospital. This relieved the committee’s fears of the gambling problems that existed there and allowed the Adventists to keep the property. And to this day this is the only privately owned property on the reservation.

Before returning to South Lancaster, I want to give you a short history of the Langwood Hotel. In 1850 four men bought land on Woodland Road which in those days was a narrow, winding dirt road in a thickly wooded area where two horse-drawn carriages would have difficulty passing each other in certain areas. These four men built four magnificent stone buildings. Two are still standing. One is directly across the street next to the M.D.C. powerhouse. The other, built by William Lang, is on the hospital grounds next to the West Wing. Mr. Lang built this for his own private home and modeled it after a chateau he had seen in Europe. He called it The Langwood. When the property was sold in the 1880's the new owners added a wing to its north side, constructing a hotel. They kept the original name and called it the Langwood Hotel. The property again changed hands, and when the Adventists bought it in 1902, it was owned by Dr. Coggsell, a Boston physician.

These next two paragraphs are quotations.

“In the 1860s prize fighting was illegal, and the Great Island on the lake was used for boxing matches held from the eyes of the local sheriff with watchouts left on shore. It has been said that one boxing match went 260 rounds lasting more than nine hours. Illegal cock fights were also held there, and curious onlookers who came to watch the fights were tied to trees to prevent them from going ashore to warn the sheriff.

The Langwood Hotel itself had also become a place for gamblers of the day, as evidenced by the cock fighting pit still visible in the cellar, and a hidden gambling room was reached only by a secret narrow staircase.”

Let us now return to South Lancaster where we left the sanitarium people and the Thayer family having discussions. Although the Thayer family was against having a sanitarium in their neighborhood, they had no ill feeling toward the school. The conference now had not only land on which to build but also had access to the lumber from the building which was to be dismantled in South Lancaster. But how were they to transfer the lumber to Spot Pond 45 miles away? It would be much too costly to move by horse and wagon.

Well, let's return to our friend Mr. Thayer. He not only owned considerable property in South Lancaster but he also owned the railroad that served this area to Boston, and in order to complete the deal he offered to transport all the lumber on his railroad to Melrose. From here it would be taken to Spot Pond by oxcart and horse and wagon, and thus a great deal of lumber was transported to Spot Pond.

Let's reconstruct this giant jig saw puzzle.

1. The problems of a successful young hospital in South Lancaster, Mass.
2. Mrs. White's letters of advice from Australia.
3. The unusual events that brought to a successful conclusion, the obtaining of a beautiful piece of property on Spot Pond.

Surely, it seems that the Hand of Providence made itself felt.

During the Summer of 1902 the sanitarium in South Lancaster began moving some of its patients to its new location. On October 12, 1902, the last twelve patients were transferred. In 1903 the new hospital cared for over 800 patients. In 1904 student nurses numbered thirty. Also in 1904 they began dismantling the building in South Lancaster and transporting the lumber to Spot Pond.

This is a side note. Between 1902 and 1965 this hospital graduated more than 750 nurses. Since 1965 the nurses have been receiving their nurses' training at Atlantic Union College. When the nurses' training program was discontinued in 1965, many of us felt that an important part of the hospital was lost.

On January 1, 1905, a second fire broke out in this area, destroying the stables and many horses. There was also damage to the engine room and to about 25 patients' rooms in the newly constructed North Wing. This created new problems, and it seemed that the uphill fight that this sanitarium had been experiencing since its early days in South Lancaster was continuing. But through foresight, determination, and faith the hospital moved ahead and in 1906 erected the large wooden building which many of us remember.

At this time I will discontinue my story temporarily and show you some slides.

SLIDES

Slide No. 1. The original New England Sanitarium. A converted dormitory, located in South Lancaster with 22 beds. It received its first charter in 1899. Was dismantled in 1904 and its lumber was transported to Spot Pond by railroad.

Slide No. 2. Patients on the front lawn enjoying fresh air and sunshine. This is the scene that seemed to upset Mrs. Thayer, who lived across the street, seeing invalids in wheelchairs when she looked out her window.

I'm told that Mrs. Thayer fell years later and received severe injuries which made her an invalid, and she spent the rest of her days in a wheelchair.

Slide No. 3. When I first found this picture I thought I had discovered a photograph of the famous bloomer girls of the gay nineties. Actually, this is a picture of the so called "bath girls" showing the uniforms they wore when giving hydro therapy to patients — as I look at this picture, I can truthfully say "Gals, you've come a long way."

Slide No. 4. Mrs. Ellen G. White, who wrote letters of advice from Australia. Mrs. White died in 1915 at the age of 87.

Slide No. 5. The Langwood Hotel. A beautiful summer hotel which opened each month of May and closed during the winter season. A four-story building containing 150 rooms. This is what the travelers from Battle Creek saw on their first two visits to Spot Pond when trying to purchase the property.

Slide No. 6. The Langwood Hotel on fire. This picture was taken in the late afternoon on April 1, 1902, showing the long shadows cast from the fast setting sun.

As a note of added interest, I will try to describe to you the difficulties under which those firefighters worked, trying to control a blaze of this size.

First, notice that there are many townspeople on their bicycles at the fire, but no fire apparatus as yet. The reason for this will become clear as I continue my story.



Slide No. 1.



Slide No. 2.



Slide No. 3.

As you look at this picture, keep the following facts in mind. In those days all fire apparatus was pulled by horses. These horses were not owned by the town of Stoneham but were owned by the townspeople who were under contract to supply the horses as needed.

When fire box No. 37 sounded the alarm, the townspeople knew that the Hotel Langwood was on fire and rushed there on their bicycles. The fire fighters heard the alarm at the same time, but they had to literally run one to two miles to get the horses, usually at farms; take them to the fire station; hitch them to the apparatus; and drive them to the scene of the fire.

The long shadows from the setting sun tells us that there would soon be total darkness, and firefighting would be done mostly in darkness of night, except for the light from the flames.

When the steam-driven water pump called the “Colonel Gould” arrived at the fire, it was soon realized that it could not generate enough power to draw water up from Spot Pond because of the steep incline. The nearest adequate water supply was a small reservoir about a quarter of a mile to the rear of the hotel. As the flames spread rapidly, a telephone call was made to the Melrose Fire Department, which at the time was fighting a fire of its own.

By the time all the fire apparatus had arrived, the main building was a mass of flames. The large crowd that had gathered hampered the fire fighters who were now working in darkness, trying to save the nearby structures from the heavy shower of glowing embers and sparks. After 15 hours of fire fighting the all-out signal sounded at 9:30 the following morning.

When we consider the conditions under which those fire fighters worked, they rightfully received a great deal of credit for saving as much property as they did.

On the following day, the *Boston Globe* described the fire with these words, “The great flames lit up the night sky, creating a scene of costly grandeur.”

Slide No. 7. Another scene of the hotel on fire.

Slide No. 8. Steam driven water pump called the “Colonel Gould,” named after a Stoneham Civil War hero. It contained a 750-gallon nickel plated water tank. Water was brought to a boil by a coal furnace under the water tank. It served until 1925.



Slide No. 4.



Slide No. 5.



Slide No. 6.



Slide No. 7.



Slide No. 8.



Slide No. 9.

Slide No. 9. Results of fire. Damage estimated at \$100,000. The building was insured for \$50,000; in today's market, this would be in the millions. The only casualty was one firefighter receiving second-degree burns to his hands. There were no summer guests in the hotel at this time of year. Langwood Hall on right received only smoke damage.

Slide No. 10. The first New England Sanitarium on Spot Pond after repairs and reconstruction of burned Langwood Hotel were completed in 1902. It contained 23 beds and treated only nonsurgical medical cases and a few obstetrical cases. In those days most babies were born at home.

Slide No. 11. Shows the East Wing which was built from the lumber from South Lancaster. This wing increased the hospital from 23 to 41 beds and included the following: nurses' dormitory, nurses' library, chapel, employees dining room, food factory, hospital laundry and grocery store.

Slide No. 12. First nurses graduating class from New England Sanitarium and Hospital at Spot Pond. Focus for a moment on the man seated in the middle of the front row. He was the medical superintendent of the first sanitarium in Battle Creek, Michigan, which opened in 1866. He was, at the turn of the century, a well known surgeon, an inventor of surgical instruments, and of the electric cabinet, used by many hospitals for treatment of various ailments.

He is still best known throughout the world for his invention of breakfast foods which I think all of us have eaten at one time or another. His name is Dr. John Harvey Kellogg, inventor of Kellogg's Corn Flakes and other dry breakfast cereals, now available all over the world.

Dr. Kellogg died in 1943 at the age of 91 years.

Slide No. 13. Patients coming to the hospital in public carriages or "conveyors" from Wyoming Depot in Melrose. These were the taxis of the day.

Slide No. 14. Patients who phoned the hospital in advance telling the time of their arrival at Wyoming Depot were met by this hospital-owned carriage and taken to the hospital. Notice the name "Langwood" on the carriage.

Slide No. 15. Patients going shopping or sight seeing.

Slide No. 16. Many employees owned their own horses and when not on duty enjoyed horseback riding on the seven or eight miles of picturesque roads on the reservation, just as people do today.



Slide No. 10.



Slide No. 11.



Slide No. 12.



Slide No. 13.



Slide No. 14.



Slide No. 15.



Slide No. 16.

Slide No. 17. Patients who were able, were wheeled onto the front lawn where they could enjoy the fresh air and sunshine. In those days most of the patients were not acutely ill, but suffered from some type of disabling condition such as chronic arthritic joints, bursitis or tendonitis. Many were confined to wheelchairs, and some were bedridden.

Slide No. 18. Nurses' kitchenette.

Slide No. 19. Nurses' library.

Slide No. 20. Probie nurses in dietetic class, learning to prepare balanced diets. During their first six months of training, probie nurses wore black ties.

Slide No. 21. Employees dining room in East Wing of Langwood Hall.

Slide No. 22. Parlor in Langwood Hall shows elegance of stone building that William Lang built in 1850. The old fireplace opening on the east wall is still present but was covered up when the room was redecorated and made into offices.

Slide No. 23. Tate twins, born in 1909, were the first twins to be born in New England Sanitarium and Hospital. They are being held by the Frye twins.

Slide No. 24. Tate twins taking nurses' training course. Graduated in 1930 and are the twin sisters of Mrs. Murial Hamilton, also a graduate of this hospital.

Slide No. 25. Hospital laundry in basement of East Wing. On the west end of this room was a door which led to the old cock fighting pit.

Slide No. 26. Fire on January 1, 1905, destroyed the stables and many horses. It also caused some damage to the engine room and to about 25 patients' rooms in the newly constructed North Wing.

Slide No. 27. Main wooden building erected in 1906 increased the hospital capacity to 65 beds. The first operating room was opened at the south end of the fifth floor of this building in the second decade. Years later, the first pediatric department was opened on the north end of the fifth floor. The fourth and third floors were for chronic care cases. The second and fifth floors were for acute care cases, including infections, pneumonias, fractures, and surgical cases.



Slide No. 17.



Slide No. 18.



Slide No. 19.



Slide No. 20.



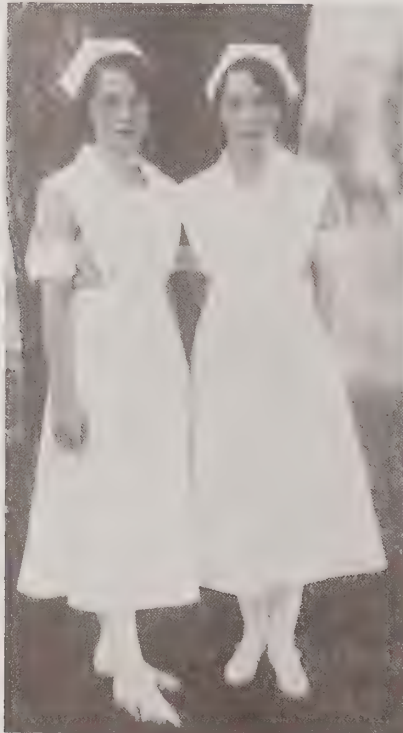
Slide No. 21.



Slide No. 22.



Slide No. 23.



Slide No. 24.



Slide No. 25.



Slide No. 26.



Slide No. 27.



Slide No. 28.



Slide No. 29.



Except for surgical and obstetrical cases, the main treatment in those days was some type of hydrotherapy, usually in the form of warm moist packs. They also used Turkish and Russian baths, combined hot and cold showers and sprays.

Slide No. 28. Sterilizing room of 1915. The two cylindrical tanks produced enough distilled water to enable the hospital to make all of its own normal saline, tincture of green soap and boric acid solutions. The small boiler in front of the nurse was used to sterilize all instruments except scissors and knife blades. These two instruments were sterilized in a mixture of formaldehyde and alcohol. The small autoclave behind the nurse was used to sterilize surgical drapes, towels, sponges, and gloves.

Slide No. 29. The next addition to the hospital was the Browning Memorial, built in 1917. There is an interesting story that goes with the erection of this building. The hospital bought a Shaker Village in New Hampshire. They then sent employees up there to dismantle the buildings, and they brought back enough lumber to not only build the Browning Memorial but also the Glenhurst building, which still stands on the hospital grounds. Browning Memorial increased the hospital's capacity to 91 beds.

Slide No. 30.

The Browning Memorial served mostly sanitarium patients who were not acutely ill, and could come and go as they pleased. Here, they enjoyed rest and relaxation as well as hydro and physical therapy treatment. They also attended and enjoyed occupational therapy classes, musicals, lectures, and "lawn games." These forms of treatment were meant as a prophylaxis as well as a treatment. It was considered good therapy then and is still considered good therapy today. These patients had the comforting feeling that a doctor or nurse was always available. Some stayed here for many months and a few made it their home.

And here is a note of interest: This hospital has been recognized as a pioneer in physical therapy not only in this area but throughout the country. On occasions the Massachusetts General Hospital has referred patients to this hospital for special physical therapy treatment.

With the coming of health insurance programs, the trend shifted to the treatment of specific diseases for specific parts of the body, rather than the body as a whole. As the number of acute care cases increased, the number of sanitarium patients diminished until this latter section of care was completely phased out in the early 1950s. In 1967 the name "Sanitarium" was dropped and since then the hospital has been called The New England Memorial Hospital.



Slide No. 31.

Slide No. 30. Solarium on the fifth floor of Browning Memorial where patients could enjoy sunshine on cold days as well as warm days. They also enjoyed occupational therapy classes in a tropical atmosphere with tropical plants scattered throughout the room.

Slide No. 31. The second floor contained this beautiful parlor where patients enjoyed many social events, musicals and lectures. Most of the furniture was mahogany.

Slide No. 32. Main dining room on first floor of Browning Memorial. To announce that meals were being served, a call boy would go to each floor and play the musical chimes. On many occasions I remember seeing Mrs. Ruble, the medical director's wife happily tapping these chimes, announcing that meals were being served. In the early days patients in this room were served by professional waitresses. Later they were served by hospital employees and probie nurses. They were never fed cafeteria style.

Slide No. 33. Patients getting exercise in the fresh air and sunshine, pitching horse shoes, and playing croquet. Tennis court is in the background.

Slide No. 34. Showing the spacious front lawn, which contained a nine-hole golf course. It seemed that the golfers were having difficulty with their game. The lawn was being cut by a horse-drawn lawn mower, and the horses' heavy iron shoes were digging up the turf very badly leaving many pot holes, and this was hindering the golfers' putting game. I'm not a golfer, but it seems to me that just as these holes hindered the putting game, they should help the driving game. With a lawn full of holes it was very easy to get a hole in one. (I was just checking to see if you were still awake.) In order to try to correct this problem of damaging the lawn, they fitted the horses' hooves with soft leather boots. Although I tried, I couldn't find a picture of a horse wearing boots.

Slide No. 35. With increasing calls for surgical and obstetrical care the surgical-obstetrical wing was added to the north side main wooden building in 1924. This new wing, frequently referred to as the "Stucco Building", increased the hospital capacity from 91 to 135 beds. With the addition of this building, the hospital now became a full-service, acute care general community hospital with two operating rooms, delivery room, nursery and up-to-date laboratory and pharmacy.

Slide No. 36. This shows the main operating room in the stucco building. I have many precious memories of this room because it was in this room that I worked together with my brother and sister-in-law many times. On the right side of this picture is a small observation platform where student nurses came to see operations and learn about nurses' operating room techniques. Next to the main operating room was a minor operating room. While doing T&As in this minor operating room in 1938 I met a young student nurse. She was my scrub nurse, and she has now been my wife for 44 years.

Slide No. 37. The three Tauros—Dr. Anton, Dr. Emily and Dr. Arthur working together in the O.R.

Slide No. 38. This was our delivery room. For those of you who were born in this hospital before 1958, this is the room in which you were born. Two of the babies that I delivered in this room are now members of our medical staff. Some of you may have been in that bassinet under the window.



Slide No. 32.



Slide No. 33.



Slide No. 34.



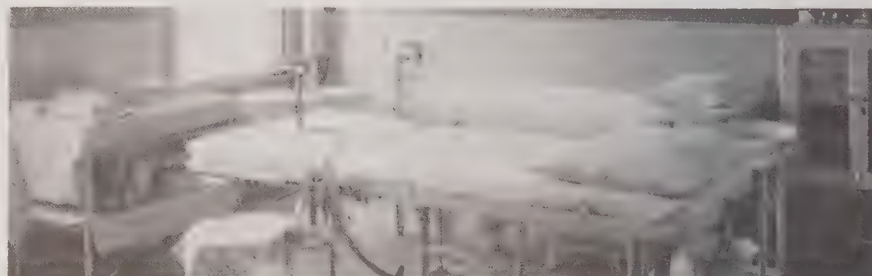
Slide No. 35.



Slide No. 37.



Slide No. 36.



Slide No. 38.

Slide No. 39. The nursery with about a dozen bassinets.

Slide No. 40. Pharmacy and laboratory in the basement of the stucco building.

Slide No. 41. O.T. room in the second floor of stucco building, later changed to four-bed ward.

Slide No. 42. This picture shows how the nurses' uniforms changed as they progressed in their training from probie to graduate nurse.

Slide No. 43. This 16-cylinder Cadillac of the early 1930s was donated to the hospital by the widow of one of the patients. The hospital removed the rear seat and fitted it with this folding bed, and it served as the hospital ambulance for nine or ten years.

Slide No. 44. Shows the hospital vegetable farm which existed into the third decade of the century and was then replaced by a fruit orchard.

Slide No. 45. The hospital fruit orchard contained mostly apple trees and two or three peach trees and made a very pretty sight when in full bloom. The orchard was replaced in the mid fifties with homes for hospital employees.

Slide No. 46. Glenhurst Building built with the lumber from the Shaker Village in New Hampshire, now used as apartments for employees.

Before going to the next slide I want to read to you from an advertisement called "The New Era — 1909" that the hospital put in a local newspaper.

"Our great lawns, wooded with grand oaks, stately elms, graceful maples, and fragrant pines stretch down to the very edge of a beautiful lake.

"We have our own dairy, bakery, and farm which ensures our guests with the best service and the purest and freshest foods.

"It is our fundamental belief that health is a legitimate harvest of a correct daily life and obedience to the laws of one's being.

"The real purpose of this institution is to return to nature as far as possible and to follow simplicity and naturalness without riding any hobby or following any fad."



Slide No. 39.



Slide No. 40.



Slide No. 41.



Slide No. 42.



Slide No. 43.



Slide No. 44.



Slide No. 45.



Slide No. 46.



Slide No. 47.



Slide No. 48.



Slide No. 49.



Slide No. 50.

HOSPITAL EXPENSES

Room and Board.....	\$10 per week
Room and Board with treatment and medical attention.....	\$16 per week
Room and board for children.....	\$3 to \$7 per week
Private nurses (10 hours/day duty).....	\$15 per week

Slide No. 47. Aerial view of the hospital as it existed between 1924 and 1951 showing the:

First New England Sanitarium on Spot Pond in	1902.....	23 beds
New England Sanitarium with North and East Wings	1904.....	41 beds
Main Wooden Building	1906.....	65 beds
Browning Memorial	1917.....	91 beds
Stucco Building or Surgical Obstetrical wing	1924.....	135 beds
Glenhurst Building		
Maintenance Building		
Engine Room		
Fruit Orchard		
Old Tennis Court		

Slide No. 48. Nurses enjoying the spacious front lawn.

Slide No. 49. Ruble Building added to south side of Browning in 1951. In the mid 50s the expanding pediatric and obstetrical departments found new homes in this building which was the largest single addition to the hospital, adding 50 new beds and 25 bassinets, increasing the hospital capacity to 185 beds.

Slide No. 50. West Wing built in 1969. As the hospital grew not only were existing departments expanding to new buildings but new departments were also being introduced, including psychiatry, oncology, and nuclear medicine. The addition of the West Wing in 1969 along with the new operating rooms, emergency rooms, and radiology departments in 1973 containing the most modern and sophisticated equipment available, brought the hospital capacity to its present level of 301 beds.

MEDICAL PRACTICE IN THE EARLY DAYS

I want to tell you briefly about how hospital practice was in the late 30s and early 40s. Although it was pretty much the same in all hospitals, I will confine my remarks to this hospital.

First, the Pediatric Department. You recall I told you that this was a small room on the fifth floor of the old wooden building and contained three cribs. In this room we treated all types of infections, mastoids, pneumonias and ruptured appendices, and this was before the days of antibiotics.

We had no intravenouses in those days. In order to prevent dehydration we always used a clysis; the solution was always normal saline. A comparatively long needle was inserted into the child's thigh muscles. When one thigh was completely saturated with fluid and usually swollen to twice its normal size, the solution was then directed to the other thigh.

To prevent the child from thrashing its legs or bending its knees, the legs were strapped to splints. To help ease some of the pain, several cc's of novocaine were added to the clysis solution. If the child's thighs were unable to absorb the solution fast enough or became too swollen or inflamed, we added a Murphy drip or rectal water taps.

Adults usually had two to four clysis needles going at one time — one in each thigh — and when necessary, one under each breast.

The only intravenouses given in those days were for transfusions, and these were always given in the operating room. Since we had no blood banks, all transfusions were fresh whole blood, usually taken from hospital personnel who had already been classified as universal donors. I remember at least two occasions when I had to break my scrub and donate a pint of blood in an emergency.

All syringes and needles were sterilized in boiling water, but before re-sterilizing, all needle points were checked for dullness. If the nurse felt that the needle was dull, she sharpened it with a "sharpening stone" and then smoothed off the rough edges with a piece of gauze which had been soaked in a solution of graphite and ether. Many a nurse's finger was punctured by this procedure.

Operating Room. We didn't have the neatly packed sponges that we see in the operating room these days. The hospital bought bolts of gauze, and any student or graduate nurse who wanted to make extra money would go to the utility room where the bolts were kept. Here they would cut out sections of gauze, fold them into proper sizes and shapes, wrap them in brown paper, and sterilize them. For this they were paid at the rate of 19½ cents per hour. All cotton balls and swab sticks were made by nurses.

Surgical gloves were sterilized many times. Before each sterilization gloves were checked for pinpoint leaks. if one was found, it was patched with the rubber from a discarded glove. Some gloves had as many as half a dozen patches. No patched glove, however, was used in the operating room. They were used only on the wards.

Obstetrics. New mothers were kept in bed for at least one week while waiting for the uterus to involute to normal size. Ten cc's of the mother's blood was injected into the suprascapular area of her newborn baby immediately after delivery. This procedure was discontinued in 1938 or 1939.

Anesthesia. General anesthesia was a mixture of nitrous oxide, oxygen and ether. But anesthesia for thyroid surgery was quite different. A thyroid patient was never to be told on what day he was to have surgery. It was felt that with an over active goiter the added tension would increase his risk for surgery. So for several days before surgery, he was given a small plain-water enema. On these days several sponges soaked with ether were placed in different locations in the patient's room to acquaint him with the smell of ether. On the day of the surgery, however, the enema now contained a mixture of ether and oil. Since the patient had already been accustomed to the smell of ether in the room, he thought he was getting another plain-water enema. When he woke up his thyroid was gone. This procedure was called "stealing the gland." I'd call it "being sneaky."

Employees' Duties. Telling you the duties of the following three persons fairly well projects the level of development that this hospital had reached in the late 30s and early 40s.

1. Howard Hackney, a male nurse. His duties were:

- Hospital anesthetist
- Laboratory technician
- Manager of pharmacy

2. Dr. Clyde Haysmer. His duties were:
 - Hospital general surgeon
 - Hospital orthopedic surgeon
 - Hospital radiologist
3. Celia Lamb. Her duties were:
 - Booking all appointments for the five permanent Adventist doctors.
 - Scheduling all operations.
 - Booking all admissions for the entire staff.
 - Sometimes taking dictation for histories and physicals and discharge summaries.

I am nearing the end of my story. I have seen hundreds of nurses come and go. I have seen hundreds of hospital personnel come and go. I have seen about a dozen hospital administrators come and go. As for me, I come but I don't go.

Although many of my memories of years gone by will eventually fade away, those of the old "sanitarium" will remain with me forever.

And finally there is one person whose character remains most vividly in my memory. He was the first administrator that I met here. Dr. Ruble, for whom one of our buildings is named, was a kind man and very religious. He was a real disciplinarian, but he was as sincere as he was stern. He never scolded anyone publicly. If he saw a minor rule infraction, he would stare at you without saying a word, but the message was clear. If a severe reprimand was in order, whether you were a doctor, supervisor or maid, you were called to his office. He would remind you of the rules, regulations and principles under which the hospital functioned, and you were expected to abide by them. He always spoke in a soft voice. A second warning was usually not necessary.

One day his secretary called me to tell me that Dr. Ruble wanted to see me in his office. My first reaction was being a little frightened. I stalled going to his office for at least three hours trying to figure out a way to defend myself. But defend against what? The concern that came to my mind most frequently was that I was dating a student nurse, and one of the strictest rules of the nurses' training program was that student nurses could not date staff doctors. It could mean suspension for the nurse plus taking away the doctor's privileges.

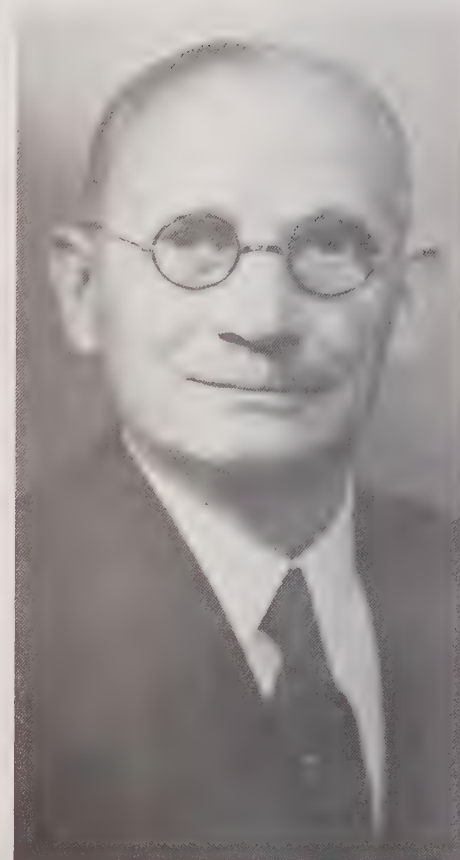
I finally got up the courage to go see Dr. Ruble. His secretary greeted me with a smile. If only Dr. Ruble would do the same. She escorted me into his office. He too, greeted me with a smile, but it was a faint smile. The first thing he said was, "I'm glad you like to bring your patients to this hospital." He kept staring at me through his thick glasses. I thought his next statement would be "If you want to continue sending your patients here. . ."

He didn't say that. He talked about the hospital. He talked about patients in general. He talked most of all about the Depression and the problems it presented. And as he spoke in his usual soft voice, I could feel my fears gradually melt away. I remember his last words very well. He said, "My hopes and dreams are that some day this wooden building will be replaced by a beautiful, modern hospital."

If Dr. Ruble could be with us here today, I am sure that he would say to all of you who have been associated with the New England Memorial Hospital, "Thank you for helping to make my hopes and dreams come true."

I hope you have enjoyed my story. Thank you.

— Arthur L. Tauro



Dr. Ruble

Medical Directors, Superintendents:

1899-1907	C. C. Nicola
1907-1908	C. O. Prince
1908-1922	W. E. Bliss
1922-*	L. E. Elliott (*acting)
1922-1924	W. C. Dunscombe
1924-1929	V. L. Fisher
1929-1943	W. A. Ruble
1943-1948	C. E. Parrish
1949-1951	J. S. Kootsey



Mr. W. von Maack
Current President

Business Managers, Administrators:

1899-1903	W. A. Wilcox
1903-1908	W. M. Lee
1908-1909	J. B. Huguley
1909-1916	J. G. White
1916-1917	H. B. Steele
1917-1918	K. K. Presley
1918-1920	E. J. Baker
1920-1921	R. Hook, Jr.
1921-1924	V. MacPherson
1924-1927	S. W. McNeill
1927-1941	E. L. Place
1941-1949	H. E. Rice
1950-1954	A. C. Larson
1954-1957	R. G. Manuel
1957-1961	V. D. Dortsch
1961-1962	K. W. Tilghman
1963-1970	R. L. Pelton
1970-1976	T. O. Moore

Presidents

1976-1981	E. L. Wall
1981-	W. von Maack

SOURCES OF INFORMATION LISTED ALPHABETICALLY

Lois Cavanaugh

Ronald Doughty

James Gerard

Elder B.M. Heald

Elva Heald

Mildred Judkins

Robert Marston

Public Relations — New England Memorial Hospital

David Stone

Marjorie Stone

Stoneham Fire Department

Stoneham Public Library

Remember when . . .







Class of 1904



NEW ENGLAND
SANITARIUM
AND HOSPITAL
MELROSE, MASS.
Class of
1925



Durdy



NEW ENGLAND
SANITARIUM & HOSPITAL
Class of 1926



Class of 1927. New England Sanitarium and Hospital



Class of 1929

Front Row: Anne Farley, Lillian Davis, Dorothy Rodeck-Doughty, Althea Travis Barrett, Florence Bell Green, Josephine Byllesby Green, Barbara Litchfield.

Back Row: Mildred Farley Stackhouse, Zilla Cleaves Redding, Ruth Strand McIntosh, Helen P. Jackson, Ruth Grimes Heath, Abbie Andrews Record, Gertrude Green, Hazel Durrell Ekstrom, Rigmor Sorensen Cooper.



Class of 1930

Front Row: Ruth Hartle-Lindey, Mildred Tate-Wendell, Myrna Tate-Russell, Gladys Giberson, Lester Gaul, Charlotte Greiner, Carmen Alverado-Casson, Alvilda MacKenzie-Villemain.

Back Row: Velena McCashen-McDunnah, Letta Christensen-Harrington, Evelyn Jordan-Evans, Gladys Mayer, Peggy Tyler, Viola Hallifax-Anderson, Emma August-Cleaves, Lillian Peck-Powers, Mabel Porter-Wilday.



Class of 1936

Left Row (Back to Front): Roy Smith, Orene Wiley-Smart, Phyllis Wilcox-Shaw, Lillith Newball-Richli, Elsie Deutsch-Weitz, Evangeline Dadman-Timperley, Ruth Wilkie-Boryk, Olive Larkin-Fitts, Danica Todorvich-Kelchner.

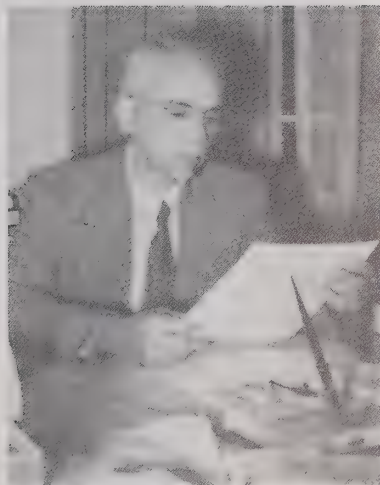
Right Row (Back to Front): Elton Roach, Vera Mann-Scott, Irene Conklin-Anderson, Esther Tollerton-Roach, Mildred Ball-Burnham, Joyce Vanderpoll-Karpel, Hazel McConnell-Hammond, Mildred Wedde-Bredahl, Leona Griffis-Ermshar, Lulu Hattingh-Hoof.



Class of 1938



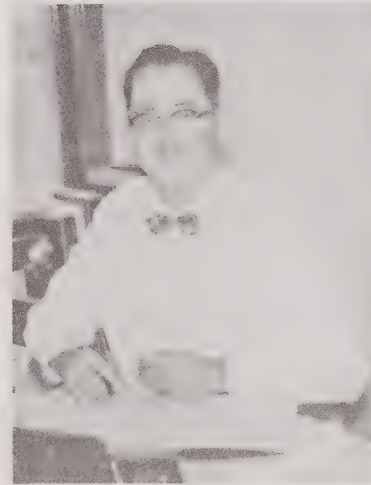
A Student Group



Clyde Haysmer, M.D.,
F.R.C.F., Ed. F.A.C.S.



Roger Heald, M.D.



David Toppenberg, M.D.



Roderick Carruthers, M.D.



Class of 1950



Class of 1951



Class of 1952



Class of 1953

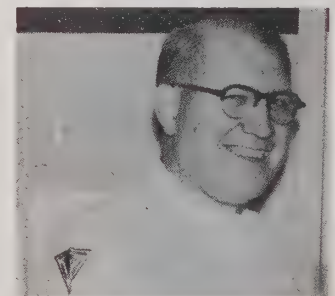


Class of 1955







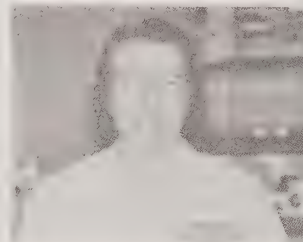


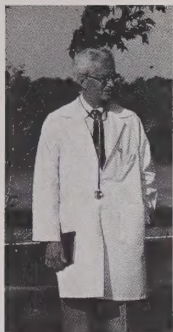


Class of 1960

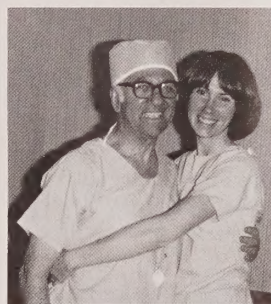
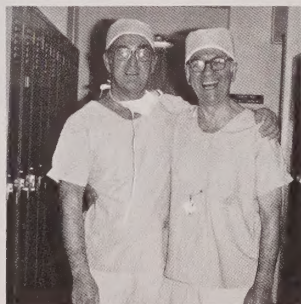








O.R. Gives Me a Suprise Birthday Party



STONEHAM PUBLIC LIBRARY



3 1509 00050 6538

pbk.

974.44 Tauro, Arthur L.
Tl9n A history of New England
c4 Memorial Hospital

STONEHAM PUBLIC LIBRARY
STONEHAM, MA 02150

DEC 04 1984

A TRIBUTE TO LANGWOOD HALL

Langwood Hall, birthplace of the New England Memorial Hospital, has now become scarred and wrinkled with age, and may soon be torn down.

During it's long lifetime it has witnessed many historical events. Built in 1850 by William Lang, it served as his private home, and he called it The Langwood.

In the 1880's, it's owners added a wing to it's north side, erecting a beautiful summer hotel. They named it "The Langwood Hotel". The hotel eventually became a gambling center so severe, that the Commonwealth of Massachusetts was making plans to reposses the property.

On April 1, 1902, fire destroyed the entire hotel except for the stone building which we still call Langwood Hall, Shortly after the fire, Seventh-day Adventists bought the stone building and converted it into a 23 bed hospital. And thus was born The New England Sanitarium and Hospital on Spot Pond.

Having become scarred and wrinkled with age, Langwood Hall has now become unattractive, but in the process of aging, it has seen many of it's offspring grow and develop into what is now one of the most beautiful campuses in this area. Some of us, because we have somewhat deeper roots here, look at this old building and still think of it as "home".

Each day that I come to the hospital and look at this scarred old building, I can't help but think of this quotation that I read many years ago.

"Scars were never meant to bring us shame
They only show we've been through pain".

How appropriately these words apply to Langwood Hall with it's long, proud and sometimes painful history.

After it is gone. . . what follows? Although it will no longer be in our sights, it will be in our memories. And, just as it is true with human beings, as long as it remains with affection in the hearts and memories of those it leaves behind, Langwood Hall will never die.

